

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00773390	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Cloud Data Services</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>	
Mailing Address <b>1350 W SOUTHPORT ROAD</b> <b>BOX 130</b>		Amount <b>5978.78</b>	
City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46217</b>	Transaction ID : <b>SE-S436465</b>
Purpose of Expenditure Leads / Phone Lists(Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Spanberger, Abigail, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Cloud Data Services</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>	
Mailing Address <b>1350 W SOUTHPORT ROAD</b> <b>BOX 130</b>		Amount <b>5978.76</b>	
City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46217</b>	Transaction ID : <b>SE-S436467</b>
Purpose of Expenditure Leads / Phone Lists(Estimate)		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Rutherford, John, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>11957.54</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

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Date

MM / DD / YYYY  
**12 / 30 / 2021**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 6  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00773390         </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y         </div>		

Full Name of Payee <b>EYP Consultants LLC</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             M M / D D / Y Y Y Y Y Y              12 / 30 / 2021           </div>	
Mailing Address 2949 NW 120th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             747.35           </div>	
City Sunrise	State FL	Zip Code 33323	Transaction ID : <b>SE-S436473</b>
Purpose of Expenditure PAYMENT PROCESSING(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             M M / D D / Y Y Y Y Y Y           </div>
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             577446.38           </div>			

Full Name of Payee <b>EYP Consultants LLC</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             M M / D D / Y Y Y Y Y Y              12 / 30 / 2021           </div>	
Mailing Address 2949 NW 120th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             747.34           </div>	
City Sunrise	State FL	Zip Code 33323	Transaction ID : <b>SE-S436475</b>
Purpose of Expenditure PAYMENT PROCESSING(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             M M / D D / Y Y Y Y Y Y           </div>
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             577445.69           </div>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             1494.69           </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             0.00           </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;">             1494.69           </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00773390
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>LAV Services LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address <b>3468 Ruth Dr</b>		Amount <b>1494.70</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89121</b>
Purpose of Expenditure Phonebank Payroll Services(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436477</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Spanberger, Abigail, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought <b>577446.38</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>LAV Services LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address <b>3468 Ruth Dr</b>		Amount <b>1494.69</b>
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89121</b>
Purpose of Expenditure Phonebank Payroll Services(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436479</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Rutherford, John, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>577445.69</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>2989.39</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**12 / 30 / 2021**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00773390
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Ridge Innovative</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address <b>2124 Union ave.</b>		Amount <b>1079.50</b>
City <b>Costa Mesa</b>	State <b>CA</b>	Zip Code <b>92627</b>
Purpose of Expenditure Phonebank Long Distance(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436481</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Spanberger, Abigail, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Ridge Innovative</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address <b>2124 Union ave.</b>		Amount <b>1079.50</b>
City <b>Costa Mesa</b>	State <b>CA</b>	Zip Code <b>92627</b>
Purpose of Expenditure Phonebank Long Distance(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436483</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Rutherford, John, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>2159.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00773390
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Standard Data Services LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address 513 Mill Ave SE Suite 206		Amount <b>2242.04</b>
City New Philadelphia	State OH	Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436469</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>07</b> State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Standard Data Services LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 30 / 2021</b>
Mailing Address 513 Mill Ave SE Suite 206		Amount <b>2242.04</b>
City New Philadelphia	State OH	Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate)	Category/ Type <b>004</b>	Transaction ID : <b>SE-S436471</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>04</b> State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>4484.08</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 6 OF 6  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SUPPORT AMERICA'S POLICE PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00773390
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Wired4Data</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 30 / 2021	
Mailing Address 55 Lake Havasu Ave South F-677		Amount <span style="border: 1px solid black; padding: 2px;">3404.58</span>	
City Lake Havasu City	State AZ	Zip Code 86403	Transaction ID : SE-S436485
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<span style="border: 1px solid black; padding: 2px;">577446.38</span>			

Full Name of Payee <b>Wired4Data</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 30 / 2021	
Mailing Address 55 Lake Havasu Ave South F-677		Amount <span style="border: 1px solid black; padding: 2px;">3404.58</span>	
City Lake Havasu City	State AZ	Zip Code 86403	Transaction ID : SE-S436487
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<span style="border: 1px solid black; padding: 2px;">577445.69</span>			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">6809.16</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">29893.86</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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